



State of California
Respiratory Care Board
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Inquiry: I have a few questions that I hope you can answer for me or at least guide me to find the answer:

1. Calibration of Life Support Equipment: Does Life Support Equipment have to be calibrated by Licensed Personnel (RCP)? Or can it be done by a Respiratory Technician (not RCP) if that person has completed a competency in that area?
2. Where is it written that when a ventilator change is made, it must be documented on a ventilator flow sheet? And that an order has to be written for that change.
3. Do these rules apply only to RCPs or do they apply to RN and Doctors also?
4. If a RCP goes to do his/her ventilator check and the settings are all different without any new order written, do they have legal right to change the ventilator back to the last written order?

Response: The Board has reviewed your inquiries and has the following comments to offer:

1. The calibration of life support equipment is not regulated by the Respiratory Care Board; however California Code of Regulations, Title 22 places that responsibility with the person who has day to day oversight of the respiratory care department. This is stated in section §70621. In that reference it states that all equipment must be calibrated according to the manufacturer's specifications and records of such calibrations shall be kept. It does not specify by whom the calibration must be performed.
2. Section 3702 of the Practice Act clearly defines the need for a physician's order for ventilator changes or other diagnostic and therapeutic procedures. It does not dictate where that setting or change should be documented. That process is usually determined by each individual organization and is detailed in their policies and procedures as to the requirements of that practice.

3. The process of having an order also applies to nurses as well. You can find reference to it in the Board of Registered Nurses, Nursing Practice Act, section 2725 (b). Physicians, by nature of their authority, are not required to write an order to make a change. However, it makes sense, from a patient safety perspective that physicians should write an order after making a change to ensure everyone knows the settings the patient is on. That issue is usually resolved at each facility and is not regulated by any agency that we are aware of.
4. If the RCP finds a patient on different ventilator settings than they have ordered I would hope the facility has some process in place to resolve this matter. From the Boards' perspective, it is not regulated by the Practice Act. From a practitioner standpoint, I would inquire with both the nurse and the physician before making any changes. If neither can confirm that they made a change, it seems appropriate to return the patient to their ordered settings and document the change appropriately.

Reference # 2004-C-03